

<u>Water Resources Program</u> Application for a Water Right Permit

For Ecology Use (Date Stamp)

11 NOV 18 A 9:46

DEPENDENT

GROU	ND WATER ∑ SURF ANENT ☐ SHORT TE	ACE WATER	ssary.		
*A NO	N-REFUNDABLE MI 1. APPLICANT	NIMUM FEE OF \$5	50.00 MUS	Γ ACCOMPANY THI	S APPLICATION.
Applicant	Business Name:			Phone No: 360-430-295	Other No: 7 360-849-4165
Address:	East Sunn	y Sands R	oad	1,50 1,12	
City:	athlamet dress (optional):			State: Washington	Zip: 98612
Contact N	ame (if different from above	/e):		Phone No:	Other No:
Relations	nip to Applicant:				
Address:				8	
City:				State:	Zip:
Email Ado	dress (optional):				
Legal Lan	d Owner or Part Owner Na	me of the Proposed Pla	ce of Use:	Phone No:	Other No:
Address:					
City:				State:	Zip:
Email Ado	dress (optional):				
Signatu	res are required. S	'ee page 7.			
For Ecology	APPLICATION NO:	3-3058	3	SEP	A: Exempt/Not Exempt
Use	Fee Paid:	Check No:		ECY Coding: 001-001-	WR1-0285-000011
Date Returne	ed ///8///	By SC Priority Dat	e	By WRL	4. 85

Section 2. STATEMEN	F OF INTENT				
Oo you own the land on which the f no, do you have legal authority t				YES NO	
Briefly describe the purpose of you	ar proposed project:				
e Columbia River Cha	unel Improvement Pro	ject (spe	sored	in Washington by the po	
e Columbia River Cha Kalama, Longview, Vancour	er and Woodland) intend to	lease 8	0.91 4	cres of my form ford	
iterial disposal.				7	
nticipated length of time to comp	elete your project:				
Vater Use List all purposes for w	hich water will be applied to a be	eneficial us	e and li	st quantity required for each.	
Purpose(s) of Use	Rate (check one box only)			Period of Use	
	Cubic Feet per Second (CFS) Gallons per Minute (GPM)			(Continuously or Seasonal)	
irrigation	Guilons per Minace (G1 W1)	(If known)		seasonal	
· · · · · · · · · · · · · · · · · · ·					
				1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1 (1	
TOTAL:			324		
s this request for a temporary period fyes to either question above, indefended from the from	icate the dates that the water wil				
A.) If Surface Water Source	B.) If	B.) If Ground Water Source			
Spring Creek River	Lake W	☐ Well(s) ☐ Other:			
Other:					
Source Name: Columbia	River Well	Well diameter & depth:			
Tributary to:	Numb	Number of proposed points of withdrawal:			
www.j	Do yo	Do you have an existing well? TYES NO			
Number of proposed diversion p	oints: If ava	ilable, atta	ch Wate	r Well Report and pump test.	
Do you have an existing diversion	n2 VES NO	Tag ID No			

7	Parcel No.	1/2		1/4	Section	Township	Range	T	County	
		NI		E	25	8 N	6W	Work	Kiakum	
	Lot(s)	14		ock(Subdivision	JUGIN	manom	133
.01		1:	-			6.11		1		L. SHIPLE
f know	vn, enter the	e distances i	n feet	trom	the point	of diversion	or withdrav	val to the	nearest section cor	ner:
1300	Feet (1	North/X So	outh) ar	nd 2	50 feet	(East/ East/	West)			
from the	e (\square NW [Jsw ⊠ NI	E SE	Ξ []) co	rner of Sect	ion 25.			
J	Parcel No.	1/4		1/4	Section	Township	Range	T	County	
	Lot(s)		Bl	ock(s)	S	ubdivision	3	1	
r.C.1		1	C	C	.1	C 1: ·	1.1 1	1 / /1		
								val to the	nearest section cor	ner:
fe	eet (No	rth/ Sout	n) and		_feet (East/ We	st)			
from th	e (\square NW [SW N	E SE	\Box) corn	ner of Section	n			
OTE: If	more than t	wo points of	diversio	n/wi	thdrawal at	tach addition	al informatio	on on a ser	parate sheet of paper.	
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Section 5. WATER SYSTEM DESCRIPTION

Describe your proposed water system (include type and size of devices used to divert or withdraw water from source):

75 hp centrifugal irrigation pump mounted on trailer with prime pump, suction who check value of fish screen. 2280 ft. of aluminum mainline 8"diameter. 2-3.7 inch × 1100 ft. hardhose travelers. As they plan to return several times during the 20year lease for additional disposal all i-rigation equipment will be portable. The plan is to establish grass cover for evosion control after each fill. At the end of the lease the property will be returned to aguse and will continue to need irrigation.

Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION (Complete A or B, and C below)

A.) Domestic Water Systems only	B.) Municipal Water Systems only (defined under RCW 90.03.015)					
Projected number of connections to be served:	Present population to be served water:					
Type of connections: (e.g., home, recreational cabin)	Estimate future population to be served:(20 year projection)					
C.) Water System Planning						
Do you have a Water System Plan approved by the Wa	ashington State Department of Health, Drinking Water					
If yes, date plan was approved/ Water System Number:						
Name of water system:						
Are you within the service area of an existing water system? \(\subseteq \text{YES} \subseteq \text{NO} \)						
If yes, explain why you are unable to connect to the system:						

Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES Irrigation Total number of acres requested to be irrigated under this application = 80.91 ACRES *NOTE:* Outline the area to be irrigated on your attached map. Stockwater List number and kind of stock: Is the proposed project for a dairy farm? \(\subseteq\) YES \(\subseteq\) NO Other Proposed Farm Uses Describe all proposed uses: Family Farm Water Act (RCW 90.66): Calculate the acreage in which you have a controlling interest, including only: • Acreage irrigated under water rights acquired after December 8, 1977, • Acreage proposed to be irrigated under this application, and • Acreage proposed to be irrigated under other pending application(s). Is the combined acreage under existing rights greater than 6000 acres? YES X.NO Do you have a controlling interest in a Family Farm Development Permit? YES X NO If yes, enter Permit No: Section 8. OTHER WATER USES Hydropower Indicate total feet of head _____ and proposed capacity in kilowatts:__ Describe works: Indicate all uses to which power is to be applied: FERC License No:

Mining/Industrial Use
Describe use, method of supplying and utilizing water:
Other Use
Section 9. WATER STORAGE
Will you be using a dam, dike, or other structure to retain or store water? YES NO
Are you proposing to store more than 10 acre-feet of water? YES NO
Will the water depth be 10 feet or more? YES NO
If you answered yes to any of the above questions, please describe:
NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point and some portion of the storage will be above grade, you must also complete an Application for Permit to Construct a Reservoir and a Dam Construction Permit and Application.
Section 10. DRIVING DIRECTIONS
Provide detailed driving directions to the project site:
From Cathlamet follow to Oregon. Turn left at Ferry junction
on east Sunny Sand Road. Project is I mile on left side of
on east Sunny Sand Road. Project is I mile on left side of point of diversion is on right side of roade (south side)
Site Address:
235 East Sunny Sands Road
Cathlamet, Washington 98612
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Section 11. REQUIRED SIGNATURES

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

Print Name (Applicant or authorized representation)	Signature Signature	a.V. b 1j-16-11 Date
Print Name (Legal Owner or Part Owner Place	Signature of Use)	Date
Print Name (Legal Owner or Part Owner Place		Date on in which the project is located:
*Submit your application to: DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611	Central Regional Office 15 W Yakima Avenue, Suite Yakima, WA 98902 (509) 575-2490	Eastern Regional Office
OLYMPIA, WA 98504-7611	Northwest Regional Office 3190 – 160 th Avenue SE Bellevue, WA 98008-5452 (425) 649-7000	Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 (360) 407-6300

If you need this document in an alternate format, please call the Water Resources Program at 360-407-6872. Persons with hearing loss can call 711 for Washington Relay Service. Persons with a speech disability can call 877-833-6341.

If you have questions about your application, contact the Water Resources program at the regional office in which your project is located.

